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Bib Data Sheet

SERIAL NUMBER 10/792,086	FILING OR 371(c) DATE 03/03/2004 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 29917/04000
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## APPLICANTS

Challen W. Waychoff II, Piedmont, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

NONE

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

87104  
MAN

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/21/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 5	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature	Initials					

## ADDRESS

CHALLEN W. WAYCHOFF II  
 34798 NELSON DRIVE  
 PIEDMONT, OH43983

## TITLE

Colon hydrotherapy device

FILING FEE RECEIVED 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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